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CONFIRMATION NO. 8654

SERIAL NUMBER 10/820,127	FILING or 371(c) DATE 04/08/2004 RULE	CLASS 606	GROUP ART UNIT 3731	ATTORNEY DOCKET NO. 064391-5001 US03
APPLICANTS Michael D. Laufer, Menlo Park, CA; Jeffrey C. Cerier, Franklin, MA; Amos G. Cruz, Franklin, MA;				
** CONTINUING DATA ***** This application is a CON of 09/654,655 09/05/2000 PAT 6,773,441 which is a CON of 09/520,273 03/07/2000 PAT 6,663,639 which claims benefit of 60/142,492 07/06/1999 <i>60/140492 06/22/1999</i> (*)Data provided by applicant is not consistent with PTO records.				
** FOREIGN APPLICATIONS *****				
** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** ** SMALL ENTITY ** 06/18/2004				
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and Acknowledged <u>/JULIAN W WOO/</u> Examiner's Signature	<input type="checkbox"/> Met after Allowance Initials	STATE OR COUNTRY CA	SHEETS DRAWINGS 29	TOTAL CLAIMS 44
INDEPENDENT CLAIMS 5				
ADDRESS MORGAN, LEWIS & BOCKIUS LLP (SF) 2 PALO ALTO SQUARE 3000 El Camino Real, Suite 700 PALO ALTO, CA 94306 UNITED STATES				
TITLE Methods and devices for tissue reconfiguration				
FILING FEE RECEIVED 687	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	